

MAY. 17. 2006 3:10PM ZILKA-KOTAB, PC
TO: USPTO

NO. 3011 P. 1

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ZILKA-KOTAB

PC
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SAN JOSE, CA 95113

TELEPHONE (408) 971-2573
FAX (408) 971-4660


FAX COVER SHEET

Date: May 17, 2006	Phone Number	Fax Number
To: Examiner Moorthy		(571) 273-8300
From: Kevin J. Zilka		

Docket No.: NAIIP350/01.022.01

App. No: 09/900,001

Total Number of Pages Being Transmitted, Including Cover Sheet: 14

<p>Message:</p> <p>Please deliver to Examiner Moorthy.</p> <p>Thank you,</p> <p> Kevin J. Zilka</p>

☐ Original to follow Via Regular Mail ☒ Original will Not be Sent ☐ Original will follow Via Overnight Courier

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ANY OTHER DIFFICULTY, PLEASE PHONE Erica
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

May 17, 2006

MAY. 17. 2006 3:11PM

ZILKA-KOTAB, PC

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NO. 3011 P. 3

MAY 17 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

In re application of:

McArdle et al.

Application No. 09/900,001

Filed: 07/05/2001

For: PREVENTION OF OPERATING SYSTEM)
IDENTIFICATION THROUGH FINGER)
PRINTING TECHNIQUES)

) Art Unit: 2131

) Examiner: Moorthy, Aravind K.

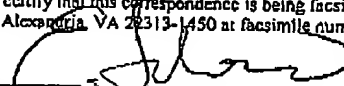
) Date: 05/17/2006

 **COPY**

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile number: (571) 273-8300 on the above date.

Signed:


Erica L. Parlow

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 2233-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☐
☒

Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.

Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.

☐
☒

Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NAI1P350). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
Zilka-Kotab, PC


Kevin J. Zilka
Registration No. 41,429

P.O. Box 721120
San Jose, CA 95172-1120
Telephone: (408) 971-2573

(Revised 1/96)

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MAY 17 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:)
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McArdle et al.) Art Unit: 2131
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Filed: 07/05/2001) Date: 05/17/2006
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IDENTIFICATION THROUGH FINGER)
PRINTING TECHNIQUES)
_____)

CERTIFICATE OF FACSIMILE

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Signed: _____

Erica L. Farlow

AMENDMENT D

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed 03/17/2006, please enter the following believed to place the claims in condition for allowance.